

## Volunteer Application for USMC Family Readiness Volunteers

### PRIVACY ACT STATEMENT

**AUTHORITY:** Section 1588 of Title 10, U.S. Code, and E.O. 9397.

**PRINCIPAL PURPOSE(S):** To enable eligible individuals to submit their application to provide volunteer service and support to applicable Unit, Personal and Family Readiness Program.

**ROUTINE USES:** This information will be used to assess eligibility, qualifications and overall suitability.

**DISCLOSURE:** Voluntary. However, failure to provide all requested information will eliminate candidate from consideration for a volunteer position with the applicable USMC family readiness entity.

**Position Applying For :**

Command Team Advisor

Family Readiness Assistant

**Unit Applying For :** \_\_\_\_\_

**Personal Information :**

Last Name : \_\_\_\_\_ First Name : \_\_\_\_\_

Home Telephone : \_\_\_\_\_

Cell Telephone : \_\_\_\_\_

E-Mail Address : \_\_\_\_\_

Mailing Address :

Marine's Name : \_\_\_\_\_

Marine's Section / Compay : \_\_\_\_\_

Check One :

Spouse

Parent

Child (over 18)

Extended Family

## **Volunteer Application for USMC Family Readiness Volunteers**

Unit, Personal and Family Readiness training: List training received and attach copies of certificates

Work/other volunteer experience :  
(Include organization, duties and length of service. Attach additional sheets or resume, if necessary and/or applicable)

Volunteer awards received :  
(Include unit and date, if applicable; attach additional sheets, if necessary)

Expectations/Goals as part of the Unit, Personal and Family Readiness Program:

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**General Information :**

Are you available to attend monthly meetings?       Yes       No

Are you available during office hours?       Yes       No

If yes, how many hours are you available:      \_\_\_\_ hours per week

Are you registered with any other service to document  
volunteer hours?

Additional information or comments you would like to include with this volunteer application  
(attach certificates if training is listed)

**Administrative Information** (To be completed by command representative)

Date application received : \_\_\_\_\_

Application screened by : \_\_\_\_\_

Date interview scheduled with commander : \_\_\_\_\_

Interview conducted by : \_\_\_\_\_

Selected for :

Command Team Advisor       Family Readiness Assistant

Appointed in writing via letter dated : \_\_\_\_\_

DD Form 2793 dated and filed : \_\_\_\_\_

**Command representative completing Administration Information :**

\_\_\_\_\_      \_\_\_\_\_  
Title      Name

\_\_\_\_\_      \_\_\_\_\_  
Signature      Date